

L16000056031

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

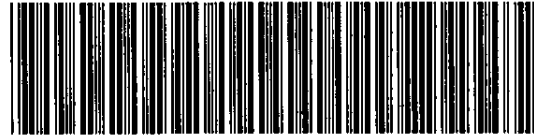
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900283265529

03/14/16--01039--028 **160.00

FILED
16 MAR 14 PM 3:00
CLERK OF STATE
ALLA BARRON

3/22/16

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hoopers Block & Concrete, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eric Hooper
Name of Person

Hoopers Block & Concrete, LLC
Firm/Company

16297 Cortez Blvd.
Address

Spring Hill, FL 34601
City/State and Zip Code

hoopersconcrete@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elise Parker at 352 777-4986
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee
☐ \$130.00 Filing Fee & Certificate of Status
☐ \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed)
☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
16 MAR 16 PM 3:00
TALLAHASSEE, FL 32301

EFFECTIVE DATE 03/10/16

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Hoopers Block & Concrete, LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

FILED

16 MAR 16 PM 3:01

STATE OF FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

16297 Cortez Blvd
Brooksville, FL 34601

Mailing Address:

16297 Cortez Blvd.
Brooksville, FL 34601

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Eric Hooper
Name
16297 Cortez Blvd.
Florida street address (P.O. Box **NOT** acceptable)
Brooksville, FL 34601
City State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Eric Hooper
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Elise Office Manager **AMBR**

Name and Address:

Elise Parker
6254 Dalton Street
Spring Hill, FL 34606

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 3/10/16 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Elise Parker

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Elise Parker

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

FILED
16 MAR 14 PM 3:01
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA